FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # F9700006855

1- Corporation Name
LINCOLN CENCON, INC.

Datastast	Diago	of Duni	

Mailing Address

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90204 041 ***150.00



1505 FEDERAL DALLAS TX 753		1505 FEDERAL STREET DALLAS TX 75201			DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 12/24/1997	SPACE	
2. Principal P	lace of Business	2a. Mailing Address	<u> </u>		4. FEI Number		Applied For
21		26 P.O. Box 1	420		APPLIED FOR		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional e Required
City & Stat	e	City & State 28 DALLAS	TX		6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip	Country 25	Zip 75221 30	Country		This corporation owes the current year Into Personal Property Tax.	angible Yes	□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD		82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
PLA	NTATION FL 33324		83				
			84	City	<u> </u>	85	Zip Code
office or i	registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered eger	of Florida. Such change was authoritions of, Section 607.0505, Florida	Statutes	the corpora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appoint the directors of the purpose of th		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRE	CTORS IN 12
TITLE	С	☐ DELETE	1.1 TITLE			Cha	nge
NAME	POUGE, MACK		1.2 NAME	Ţ			l
STREET ADDRESS	1 .			TADDRESS			
CITY-ST-ZIP	DALLAS TX 75201	☐ DELETE	1.4 CITY-S	T-ZIP		☐ Cha	nge Addition
TITLE	DVST	□ DELETE	2.1 TITLE 2.2 NAME				ngo
NAME	BYRNE, TIMOTHY			TADDRESS	•		ļ
STREET ADDRESS	1505 FEDERAL STREET DALLAS TX 75201		2. 4 CITY-S	•			
TITLE	VAS	☐ DELETE	3.1 TITLE	,,-2		Cha	nge Addition
NAME	JACKS, DAN	,	3.2 NAME				
STREET ADDRESS			3.3 STREE	TADORESS			
CITY-ST-ZIP_	DALLAS TX 75201		3.4. CITY-S	T-ZIP			
TITLE	AS	☐ DELETE	4.1 TITLE	ı		Cha	nge
NAME	EVERETT, LEIGH A		4.2 NAME	Į			
STREET ADDRESS	1000 / 00 01 11 10 0 11 11 11			TADDRESS			
CITY-ST-ZIP	DALLAS TX 75201	Operate.	4.4 CITY-S	T-ZIP		☐ Cha	nge Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME				ngenuundii
NAME	Į.			T ADDRESS			
STREET ADDRESS	1		5.4 CITY-S				İ
CITY-ST-ZIP	 	☐ DELETE	6.1 TITLE	1-211		Cha	nge
TITLE	1		6.2 NAME			الله ال	
NAME				T ADDRESS			Ţ
STREET ADDRESS	ĺ		64 CITY-S				

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address, with all other true true to the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-99

(214) 740-4440

Daytime Phone #

DR2E034 (11/98)